### Application or Docket Number

### PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

09/454252

(Column 1) (Column 2)								SMALL ENTITY  TYPE OR			OTHER THAN SMALL ENTITY		
FC	)R		NUMBE	······································	NUMBER EXTRA			FEE	<b>1</b>	RATE	FEE		
ВА	SIC FEE		・アベル ドダイ					380.00	OR	1	760.00		
TC	TAL CLAIMS		minus 20= * 15			 		X\$ 9=		OR	X\$18=	270,00	
INDEPENDENT CLAIMS 18 /2 minus 3 = * 9							X39=	35	OR	X78=	1120.00		
MULTIPLE DEPENDENT CLAIM PRESENT										OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2									131	OR	TOTAL	2200,00	
CLAIMS AS AMENDED - PART II												OTHER THAN	
			umn 1)	<b>,</b>	(Column		(Column 3)	SMALL	ENTITY	OR	SMALL		
ENT A		REM Al	AIMS IAINING FTER NDMENT	The test	HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	*		Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	*		Minus	***	N A194	=	X39=		OR	X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130=		OR	+260=		
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
		(Col	umn 1)		(Column	2)	(Column 3)	ADDIT: I EL	-	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
AMENDMENT B		CL REM AI	AIMS IAINING FTER NDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	*		Minus	***			X39=		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+130=		OR	+260=		
								TOTAL			TOTAL ADDIT. FEE		
		(Col	umn 1)		(Column	2)	(Column 3)	ADDIT. FEE			AUDII. FEEI		
AMENDMENT C	等 1000 mm 100	CL REM	AIMS IAINING FTER NDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	##		=	X\$ 9=		OR	X\$18=		
	Independent	*		Minus	***		=	X39=			X78=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								<del>                                     </del>	OR			
	W. A	AL 14		+130=		OR	+260=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

## This Forms for INTERNAL PTO SE ONLY It does NOT get mailed to the applicant.

# NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/454 252

#### Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	<u>x</u>	Fee	Fee	=	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101					760.00	=	760.00
Total Claims >20	203/103	<u>35</u> -20 =	15	x		18,00	= .	270.00
Independent Claims >3	202/102		15	x	<del></del>	28.00	=	117000
Mult. Dep Claim Present	204/104		,				=	
Surcharge	205/105					130.00	=	130,00
English Translation	139							<del></del>
TOTAL FEE CALCULA	ATION				,	•		2330.00
Fees due upon filing t	he application:							
Total Filing Fees Due	= \$							
Less Filing Fees Subn	nitted - \$							-
BALANCE DUE	= \$	3330.00		_				
A. Zhomas Office of Initial Patent	Examination						*\	

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)